

MINUTES OF THE NUTRITION COORDINATING COMMITTEE (NCC) MEETING, NATIONAL INSTITUTES OF HEALTH (NIH)

Rockledge 2, Conference Room 9100-9104, Bethesda, MD

December 6, 2012 2:00 – 4:00 PM

WELCOME

Dr. Van Hubbard, Director of the NIH Division of Nutrition Research Coordination (DNRC), convened the meeting at 2:03PM and welcomed participants. Phone participants included the following: CAPT Shirley Blakely, FDA; Dr. Anastasia Bodnar, NIH OD; Dr. Mary Cutting, NIH NIDCR; Dr. Jessica Leighton, FDA CFSAN; Dr. Megan Miller, NIH NIDDK; Ms. Sarah Ohlhorst, American Society for Nutrition; Dr. Jenna Seymour, CDC; and Dr. Xibin Wang, NIH NIAMS. The agenda for the meeting is provided as Appendix A and the list of attendees is provided as Appendix B.

Dr. Hubbard opened the meeting by acknowledging several individuals who will soon be retiring.

- Dr. Barbara Schneeman, who will be retiring at the end of December, has led FDA's Center for Food Safety and Applied Nutrition's Office of Nutritional Products, Labeling, and Dietary Supplements since 2004. In addition to her years of service at FDA, Dr. Schneeman also served on two Dietary Guidelines for Americans Committees and completed an 18-month term as the Assistant Administrator for Nutrition in the Agricultural Research Service in the United States Department of Agriculture. Dr. Hubbard acknowledged the many contributions she has made to the NCC and the nutrition community in general and wished her well in retirement.
- COL Karl Friedl, DoD is the Director of the Telemedicine and Advanced Technology Research Center (TATRC) at the U.S. Army Medical Research and Materiel Command, located at Fort Detrick, Maryland. Prior to his assignment to TATRC, COL Friedl commanded the US Army Research Institute of Environmental Medicine, the lead laboratory for Military Operational Medicine research and the premier government laboratory for biomedical research on human performance. He has been a long-time member of the NCC and will be missed when he retires in January 2013. Dr. Hubbard presented COL Friedl with a certificate on behalf of the DNRC and the NCC, thanking him for his many contributions and achievements.

Dr. Hubbard also acknowledged Mr. Cliff Johnson who recently retired at the end of November. Mr. Johnson was the Director of the Division of Health and Nutrition Examination Surveys for the Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS). He began his NCHS career as a survey

statistician with the National Health and Nutrition Examination Survey (NHANES) Nutrition Statistics Branch and was appointed Division Director in 1997. The DNRC provided him with a certificate thanking him for his contributions to the NCC at his retirement party on November 27th.

APPROVAL OF MINUTES FROM THE OCTOBER 4, 2012 NCC MEETING

Minutes from the October 4, 2012 NCC meeting had previously been sent to NCC members via email. Dr. Hubbard asked if there were any other corrections to the minutes. There were none. Dr. Paul Coates, NIH Office of Dietary Supplements (ODS), made a motion to approve the minutes, and Dr. Sharon Ross, NIH National Cancer Institute (NCI), seconded the motion. The minutes were thus approved and will be posted on the DNRC website, <http://www.dnrc.nih.gov>, along with the minutes from the previous NCC meetings.

SYSTEMATIC REVIEWS FOR EVIDENCE-BASED POLICY

Dr. Stephanie Chang, Director of the Evidence-based Practice Center Program at the Agency for Healthcare Research and Quality (AHRQ) described how AHRQ can become a “science partner” with private and public organizations by conducting systematic reviews and facilitating the translation of evidence-based research findings. Reviews are conducted at independent institutions in the United States and Canada who have been awarded five-year contracts to serve as EPCs. The goal is for reviews to be comprehensive and scientifically rigorous, transparent, independent, and unbiased. They can be used to inform and develop policy such as healthcare coverage decisions, quality measures, and Dietary Reference Intakes, as well as guidelines, research agendas, and educational materials and tools.

Methods guidance for each step in the process of conducting a systematic review has been defined in the *Methods Guide for Effectiveness and Comparative Effectiveness Reviews* (www.effectivehealthcare.ahrq.gov/methodsguide.cfm). The comprehensive, objective process helps to ensure scientific rigor. Steps include clarifying critical questions; specifying the appropriate sources of information as well as defining a priori inclusion and exclusion criteria; conducting a complete and unbiased search; systematic data extraction and assessment; and assessing the strength of evidence and applicability across outcomes. Throughout the process, transparency is maintained. There are opportunities for public comment at key stages and protocols are publicly posted. Industry is also invited to submit Scientific Information Packets. The final report therefore represents a transparent summary of the evidence, which is organized by question and outcome. The final review can be used to judge net benefits and make recommendations for practice or policy.

Dr. Chang described how EPCs were used as part of the DRI process for vitamin D and how this process can be used in the future. While each topic area has specific inherent challenges, through recognition of these challenges and learning to develop appropriate inclusion/exclusion criteria, EPCs can adapt and provide an unbiased synthesis of the literature. It is important to realize the limitations of a systematic review while recognizing their ability to provide a transparent summary of the evidence.

THIRTY YEARS OF ARMY NUTRITION SCIENCE & IMPLEMENTATION

COL Karl Friedl provided a brief history of military nutrition research and emphasized the many important contributions to nutrition science that have been made over the years. Much of the research to address the needs of modern military personnel is carried out at the Military Nutrition Division at the U.S. Army Research Institute of Environmental Medicine, which has been the leader in military nutrition research since the 1980s. Some of the scientific advancements made by these scientists and collaborators at the Pennington Biomedical Research Center have included improved understanding of metabolic requirements in extreme weather conditions and in high altitudes; caffeine use and performance enhancement; improved formulation for carbohydrate supplements and methods to achieve maximum ergogenic potential of rations; standards for optimal military physical performance; gender differences in fat oxidation; and a better understanding of energy deficit consequences.

COL Friedl emphasized the contribution of the Food and Nutrition Board (FNB) Committee on Military Nutrition Research (CMNR) to the past thirty years of research. Since its creation in 1982, the CMNR has published more than 50 reports containing analysis, guidance and recommendations to the Department of Defense (DoD) on nutrition-related priorities.

The CMNR was established to fill a void created by the Army Nutrition Research Program's suspension in 1980. All research from the Army's military nutrition program had been transferred to the USDA, but when questions arose regarding the nutritional quality of MREs (Meals Ready to Eat), it became clear that the DoD needed to revive its nutrition research program. In 1982, the Assistant Surgeon General of the Army requested that the Food and Nutrition Board of the National Academy of Sciences set up a committee to advise the DoD on nutrition related issues. Key initiatives covered by the CMNR included field ration development and testing; soldier garrison feeding and health; the Army Weight Control Program; performance enhancing ration components; energy costs in military training and operations; high stress training nutritional interventions; guidance on supplement use; and neuroprotective nutrition. Due to budget constraints, the CMNR was disbanded this year, but the annual reports

represent a rich body of literature and pose a number of questions for future consideration.

ODPHP UPDATE

Ms. Holly McPeak provided the following updates from ODPHP:

Changes at ODPHP

ODPHP had previously been divided into separate Teams. ODPHP is now referring to these “Teams” as “Divisions.” They recently acquired the Division of Health Care Quality so there are now four Divisions within ODPHP: Division of Prevention Science; Division of Community Strategies; Division of Health Communication and EHealth; and the Division of Health Care Quality.

New employee: Kellie “O’Connell” Casavale, PHD, RD, is the new Nutrition Advisor who will be the Co-Executive Secretary for the Dietary Guidelines Advisory Committee. ODPHP acquired her from USDA/CNPP! Welcome Kellie!

Division of Prevention Science: Dietary Guidelines for Americans (DGA)

ODPHP has scheduled regular meetings with USDA to jointly review and discuss nominations submitted for membership on the Dietary Guidelines Advisory Committee. An amendment was published in the Federal Register to extend the due date for nominations to December 11, 2012. ODPHP hopes to provide a slate of names, including back-up names to both Secretaries (HHS and USDA) for their approval before the Holidays. If there are no delays, they anticipate the first Advisory Board meeting to be held in mid-April at the NIH Natcher Center.

Announcement: If anyone would like to work as part of the Dietary Guidelines Management Team, to be a staff resource or a subcommittee lead/sublead, i.e. subcommittees (to be determined) please let Kellie Casavale or Holly McPeak know of your interest. This may require 20-30% of work time. You would work with committee members on agendas and materials needed for conference calls and public meetings. You would also interface with the Nutrition Evidence Library (NEL) staff to provide research studies to forward to members and if needed, would also find experts on topics to be addressed at the subcommittee level. ODPHP also plans to have an Agency Liaison as a higher level team expert to serve as an agency representative to provide current agency policies and knowledge, should subcommittees need specific agency information. The Agency Liaisons would be provided regular briefings as the DGAC progresses.

Physical Activity Guidelines

(PAG) The *Physical Activity Guidelines for Americans Midcourse Report: Strategies for Increasing Physical Activity Among Youth* will be presented by the subcommittee to PCFSN during a live webinar on December 13, 2012 from 3 – 4 PM EST. There will be an opportunity for the public to submit questions. To register for the webinar, visit: Health.gov/PAGuidelines/Midcourse.

Division of Community Strategies

The Healthy People installment of the “Who’s Leading the Leading Health Indicators?” series of webinars will be held on December 17 and will focus on the LHI topic, Environmental Quality. Featured will be the Maricopa County Rapid Response Notification System, which has addressed air quality issues in Maricopa County. This 45-minute webinar will be led by Assistant Secretary for Health Koh. The webinar will include a roundtable discussion on the importance of environmental quality. [Click here to register](#).

Division of Health Care Quality:

Over 70 stakeholders were in attendance at the "Progress Toward Eliminating Healthcare-Associated Infections (HAI)" stakeholder meeting held Tuesday, November 27 at the Washington Marriott Hotel. The morning session centered on progress made since 2008 toward achieving the five-year “National Action Plan to Prevent Healthcare-Associated Infections: Roadmap To Elimination” and included a discussion of HAI reduction targets, such as the measures for Phase II and Phase III of the National Action Plan. During the afternoon, participants discussed how to sustain and accelerate progress toward the broader goals of the Plan. By January 2013, a meeting summary is expected to be available online at www.hhs.gov/ash/initiatives/hai/index.html.

ODS UPDATE

Dr. Paul Coates provided the following updates from ODS:

Mobile App:

The NIH Office of Dietary Supplements (ODS) has recently launched MyDS Español, a Spanish version of our mobile app so that we can reach an even greater audience. MyDS gives consumers an easy way to track the dietary supplements and other products they take. It also includes consumer-focused dietary supplement fact sheets, developed by ODS, and it provides general information about ODS. MyDS can be accessed on the Apple iPhone, iPad, and iTouch devices, Android phones and devices, Kindle Fire, and Blackberry Touch devices running OS6 and above. It also

works on desktop and laptop computers when using Google Chrome and Safari browsers. Additional information about MyDS, including how to access both the English and Spanish versions, is available on the ODS website: <http://ods.od.nih.gov/myds>.

Analytical Methods Program Evaluation:

ODS launched its Analytical Methods and Reference Materials Program (AMRM) in 2002. Four years after its inception, we conducted an external review and evaluation of the program, and expert panelists made recommendations for program focus and administration. In August of 2012, the ODS conducted a second evaluation to review achievements and provide guidance for future activities. The AMRM program is designed to provide a framework for a public/private partnership with the goal of developing, validating, and sharing analytical methods for dietary supplement ingredients and finished products and producing and sharing dietary supplement reference materials. Since 2006, ODS AMRM funding has resulted in: 104 analytical method development publications (including a reference method for vitamin D metabolites in human serum); 17 single-laboratory validation studies, 10 collaborative studies; 11 AOAC Official Methods of Analysis; and guidelines for validating botanical identity methods and for documenting botanical materials acquisition and storage. Seven administrative supplements for method validation for NCCAM grantees were co-funded by ODS. A collaboration (interagency agreement) with the National Institute of Standards and Technology (NIST) has resulted in the creation of 27 Standard Reference Materials (SRM®) with 43 more in development. In addition, the program initiated three laboratory quality assurance programs (DSQAP, Vitamin D metabolite QAP, fatty acid QAP). The review panel provided several findings and recommendations. They found that the major program elements address program goals, but that priorities need refining, that the NIST SRM and QAP are the most important accomplishments, and that the AMRM has had a large impact on the DS community; much still needs to be done. The panel strongly recommended that the program should eliminate reliance on outside groups and take a leadership role in prioritizing ingredients/analytes and reviewing candidate methods and that the administrative supplement program should be continued and expanded. The panel also recommended that: AMRM use public safety as the primary factor in setting method and reference material development priorities; the program accelerate development of botanical DNA fingerprinting work being done with NIST; the AMRM continue and expand the SRM work with NIST and other CRM producers; NIST perform a “needs analysis” of the SRM marketplace; the program continue outreach efforts (courses, lab quality assurance programs); and, the AMRM reduce emphasis on clinical methods and RM and return emphasis to raw materials and finished products.

Foods as Medical Treatments for Inborn Errors of Metabolism (IEM): The Paradox of Screening All Newborns without Guaranteeing Treatment:

The ingredients found in dietary supplements and medical foods are often used to treat many of the IEM that are identified either through newborn screening or clinically. These products are regulated as foods, not as drugs, even though they are critical medical treatments. Because there is no federal authority that can mandate that all patients with IEM have access to treatment, a patchwork of coverage remains and continues to leave many patients without consistent and lifelong access to these treatments. About a year ago, staff in NICHD and ODS formed a working group to evaluate and synthesize existing data and identify research needs to improve patient access to medical foods. Their goal is to ensure comprehensive, consistent, and affordable access to medical foods for all people diagnosed with IEM. Staff have met with representatives from other agencies within HHS including the Assistant Secretary for Policy and Evaluation, HRSA, and CMS. A review paper was published recently (Camp KM, Lloyd-Puryear MA, Huntington KL: Nutritional treatment for inborn errors of metabolism: indications, regulations, and availability of medical foods and dietary supplements using phenylketonuria as an example. *Mol Genet Metab.* 2012;107:3-9. - <http://www.sciencedirect.com/science/article/pii/S1096719212002612#>). The group is working on another paper that will, among other things, pull together data documenting the estimated costs per year of providing medical foods to all patients diagnosed with IEM. Strategies to improve coverage for patients will require efforts at the state level in addition to harmonizing language that defines medical foods, as well as how they are administered and coded for reimbursement. The impact of the Affordable Care Act (ACA) on provision of medical foods for patients is not crystal clear at this time. As the group move forward, they will continue to engage people within the Federal government to help clarify how the ACA will affect individuals, to identify systems problems, and find solutions that will ultimately lead to comprehensive coverage of nutritional treatments for IEM. Comments are welcome; please let Kathy Camp (campkm@od.nih.gov) know if you would like to discuss any aspect of this issue.

REPORTS FROM NCC MEMBERS AND LIAISONS

- Dr. John Finley, ARS USDA, announced that the Beltsville Human Nutrition Research Center will be announcing five to nine new positions in the coming month, including the position previously held by Joanne Holden. Please share with anyone who might be interested.

CURRENT DNRC UPDATE OF ACTIVITIES

Biomedical Research Advanced Information Network (BRAIN) Update and Request

Dr. Hubbard informed the NCC that once again the 2013 BRAIN appropriations hearing item topics will include “Nutrition in Chronic Disease Prevention.” BRAIN is a database, currently for Dr. Collins, which catalogs information on research disease special topics, budget, and links to publications, videos, and slides. BRAIN assists Dr. Collins in preparations for speaking to the Congress; for example, Dr. Collins used BRAIN during the Senate Appropriations hearing to present slides. The record/study mode contains data compiled under different tags along with appropriate attachments, visuals (slides), and box for talking points. Visuals can be flagged to be visible and projected to an audience. The search feature allows all items with same tag to be brought together on one screen including slides. In presentation mode, choice of visuals (to be projected to audience), talking points, access to the full record, and a search feature are shown. There is also a chat feature in presentation mode so that BRAIN records and visuals can be shared between different users.

The DNRC was asked to update last year’s submission with high-profile 2011-2012 activities. Dr. Hubbard requested each IC to review and update the report with major 2011-12 activities. Please provide the updates in bullet format if possible (~90 words or less).

For each of the areas listed below please send up to 3 bullet statements describing your IC’s most important research efforts:

- Current Efforts
- Latest Advances
- Research Directions

Additionally, if you are aware of significant media coverage, legislative issues, and advocacy topics that should be included in the update, please include one or two brief bullet updates on these topics as well.

Considerations:

- Last year’s submission was one of the more lengthy ones. We have been asked to aim for a final product that is a bit shorter. Provide a link to more detail (graphics, PowerPoint slides, citations) that might be accessed if needed.

- Be mindful that this activity is not meant to consolidate all information that may be available from your organization, but rather it should highlight the information that rises to the top.
- Submissions should have been appropriately cleared within your organization's policies and procedures. Also, you are encouraged to interact with the representative to the NIH Prevention Research Coordinating Committee from your organization as well as appropriate staff from your Office of Scientific Program and Policy Analysis since they may be working on similar submissions on other related topics.

The DNRC staff will draft the update summary and circulate it for review and comment. We will do our best to capture the important points in a more succinct manner.

Taking into consideration the upcoming holiday period and the time needed to consolidate the responses from various IC's and Offices and re-circulate for review and comment, we are asking that you please send your submissions to Margaret McDowell (margaret.mcdowell@nih.gov) and Rachel Fisher (fisherrachel@niddk.nih.gov) in the DNRC by **COB, Thursday, December 20th**. The final upload of a cleared submission needs to be completed by January 7, 2013.

National Nutrition Month – Upcoming Symposium

Mark your calendars. On Friday March 22, 2013 the DNRC will be sponsoring a half-day symposium on *Gluten Disorders: Scientific, Dietary, and Consumer Education Perspectives* on the NIH campus. Speakers will include Dr. Alessio Fasano, Director of the University of Maryland's Center for Celiac Research, Baltimore, MD who was recently named for one of the highest honors in pediatric gastroenterology from the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN) - *note: Dr. Fasano will be relocating to Partners.org in January*; Dr. David Klurfeld, National Program Leader for Human Nutrition, U.S. Department of Agriculture, Agricultural Research Service, Beltsville, MD; Rhonda Kane, a Consumer Safety Officer with the Food and Drug Administration, Center for Food Safety and Applied Nutrition; and Rachael Lopez an RD at the NIH-Clinical Center.

This year, the symposium will be held in partnership with the NIH Clinical Center Dietetics Department's annual NIH Nutrition Research Day so we expect a wide turnout. The event is free and open to everyone, though preregistration will be required. More information will be available as it gets closer to the event.

Nutrition Education Subcommittee (NES):

The NES reviews nutrition education materials for consistency with the *Dietary Guidelines for Americans (DGAs), 2010*.

NES Chair, Dr. Margaret McDowell, NIH/DNRC, reported that the NES completed 2 dietary guidance reviews since the October NCC meeting.

- CDC Sodium Infographic: This is a colorful one-page tip sheet on ways to reduce dietary sodium intake.
- HRSA-Txt4Tots Text Messages: The request was for dietary guidance review of a large number of TXT4Tots health messages. The messages are designed to provide parents and caregivers of children ages 1-5 with age-appropriate information related to health eating, nutrition, and physical activity.

The NES is currently reviewing 3 submissions:

- DNRC 2013 NNM Brochure script entitled “*Navigating the Grocery Store*”: The script will be used to produce a desk-to-desk brochure for NIH employees and it will be posted on the DNRC website as well.
- PCFSN/CNPP “*Healthy Eating for an Active Lifestyle*” Tip Sheet: The tip sheet will be added to other web-based, 10 Tips Educational Series posted on the www.ChooseMyPlate.gov website.
- CNPP *Snack Tip Sheets* (2): The materials were produced in response to requests CNPP has received for tip sheets about snacking. These tip sheets are intended for adults and parents and will be added to the resources available at www.ChooseMyPlate.gov. The MyPlate Snack Ideas for adults complements MyPlate Snack Ideas for Kids: The parent tip sheet can help parents provide guidance to their children. The child tip sheet will be used to reinforce key dietary guidance messages.

HNRIM Update

Mr. Jim Krebs-Smith informed the NCC that they are waiting for the NIH FY 2012 data to be finalized before downloading to HNRIM. ICs should expect to hear from Mr. Krebs-Smith or Ms. Karen Regan about coding in late January or early February.

NEXT NCC MEETING

The next regularly scheduled NCC meeting will be on February 7, 2013.

ADJOURNMENT

The meeting was adjourned at 4:07 PM

LIST OF APPENDICES

Appendix A: NIH NCC Meeting Agenda for December 6, 2012

Appendix B: NIH NCC Meeting Attendees for December 6, 2012

APPENDIX A: NIH NUTRITION COORDINATING COMMITTEE MEETING AGENDA

Thursday, December 6, 2012

2:00 – 4:00 pm

Rockledge 2, CR#9100-9104

1. **Welcome**.....Van Hubbard
2. **Approval of Minutes of October 4, 2012 Meeting**Van Hubbard
3. **Systematic Reviews for Evidence-based Policy**..... Stephanie Chang, AHRQ
4. **Thirty Years of Army Nutrition Science & Implementation**.....Karl Friedl, DoD
5. **ODPHP Update**.....Holly McPeak, ODPHP
6. **ODS Update**Paul Coates, ODS
7. **Reports from NCC Members and Liaisons** NCC Members
8. **Current DNRC Update of Activities**..... DNRC Staff
 - Nutrition Education Subcommittee Update.....Margaret McDowell*
 - International Committee Information.....Pam Starke-Reed/Dan Raiten
 - HNRIM Update.....Jim Krebs-Smith/Karen Regan
 - PPWGCrystal McDade-Ngutter
 - Wellness WorkgroupRachel Fisher/Margaret McDowell
9. **Next Meeting – February 7, 2013**

* Updates will be included in the minutes of the meeting only

APPENDIX B: NCC MEETING ATTENDEES FOR DECEMBER 6, 2012

Agencies, Institutes, Centers, and Divisions	Members Present	Members Absent	Alternates Present	Other Individuals Present
DNRC Director	V Hubbard			
DNRC Deputy-Director	P Starke-Reed			
NIH MEMBERS				
NCI	S Ross			
NHLBI		K McMurry		A Ershow; C Pratt
NIDCR	M Cutting			
NIDDK	R Kuczmarski		M Evans	J Karimbakas; P Maruvada; M Miller
NINDS		M Mitler		
NIAID		P Sato		
NIGMS		S Somers		
NICHHD		G Grave		
NEI		N Kurinij		
NIEHS		K Gray		
NIA		J Hannah		
NIAMS	X Wang			
NIDCD		B Wong		
NIMH		M Chavez		
NIMHD		D Tabor		
NIDA		G Lin		
NIAAA		R Breslow		
NINR		P Cotton		
NCCAM	L Duffy			
FIC		M Levintova		
NHGRI		S Basaric		
NIH LIAISONS				
CC	A Courville			
CSR		R Garofalo		
NLM		M Corn		
OBSSR		D Sampson		
ODS	P Coates		C Davis	K Camp; B Costello; B Sorkin
OD/ODP	B Portnoy			
PRCC		D Stredrick		
AGENCY LIAISONS				
AHRQ		I Mabry-Hernandez		
CDC/NCCDPHP		K Scanlon		J Seymour
CDC/NCHS	N Ahluwalia			
FDA	M Poos		S Blakely	J Leighton
HRSA		M Lawler		
IHS		T Brown		
ODPHP	H McPeak			K Casavale

Agencies, Institutes, Centers, and Divisions	Members Present	Members Absent	Alternates Present	Other Individuals Present
USDA/ARS		D Klurfeld		J Finley
USDA/NIFA		D Toombs		
DOD	K Friedl			

Guests: Anastasia Bodnar, NIH/OD; Sarah Ohlhorst, American Society for Nutrition

DNRC: Y Chow; R Fisher; S Fleischhacker; J Krebs-Smith; C McDade-Ngutter; M McDowell; K Regan